

**AMENDMENTS TO THE SPECIFICATION**

*Page 3, please amend the first paragraph to read as follows:*

The cannula 1, normally formed by a single piece of moulded plastic material (conveniently polycarbonate), comprises a hollow body 3 whose cavity, visible in Figure 2, constitutes a luer cone 4 which in combination with a pair of diametrically opposite external helical teeth 5 formed at an end 6 of the hollow body 3, defines a female luer lock connector, and a tubular ferrule 7 projecting from the other end 8 of the hollow body 3, coaxially thereto. The free end of the ferrule 7 conventionally has a tapered profile with lateral outflow openings 19.

*Page 4, please amend the first full paragraph to read as follows:*

In the reverse direction of rotation, the shape of the teeth 9 and 12 makes the cap 2 ~~permanently~~ positively coupled torsionally with the hollow body 3 of the cannula 1. This direction of rotation corresponds to the unscrewing the luer lock connector 4-5 of the cannula 1 relative to a male luer lock connector of a medical infusion line or the like whereto the cannula 1 is connected in use. This allows to make extremely simple and easy the operations of removing the cannula 1 from said medial line after use, thanks to the rotation manoeuvre operated by rotating the cap 2 by means of the grip parts 10 in such a way as to command the angular displacement of the cap and, by means of the teeth 12 and 9, the simultaneous angular driving of the body 3 in the direction corresponding with the unscrewing of the female luer lock connector 4-5 relative to the male luer lock connector.